

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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SECRETARY OF THE SENATE  
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1. (a) Name of Candidate (in full) Mike Rounds			2. Candidate's FEC Identification Number S4SD00049		
(b) Address (number and street) 2418 Whispering Shores			<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Fort Pierre SD 57532-2403			3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate SD 00			

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Rounds for Senate		
(b) Address (number and street) PO Box 250 223 E Capitol Avenue		
(c) City, State, and ZIP Code Pierre SD 57501-0250		

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) 2014 SENATORS CLASSIC COMMITTEE		
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115		
(c) City, State, and ZIP Code Alexandria VA 22314-5404		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Mike Rounds	Date 05/29/2014
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 2 / 2

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

SCOTT CAPITO ROUNDS VICTORY FUND

(b) Address (number and street)

901 N WASHINGTON ST SUITE 700

(c) City, State and ZIP Code

Alexandria

VA

22314-1535

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

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Roundup for Senate  
PO Box 250  
Pierre, SD

51501

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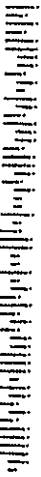


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NANCY ERICKSON  
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DANA K. MCCALLUM  
SUPERINTENDENT  
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WASHINGTON, DC 20510-71  
PHONE (202) 224-0322

# United States Senate

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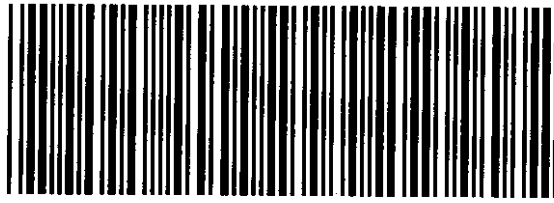
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DATE PREPARED

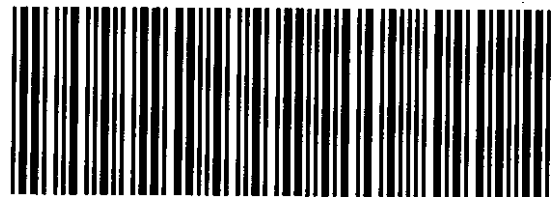
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